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NO. 517 P. 1

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FROM: Peter J. Yim
Reg. 44,417**DATE:** August 22, 2005

Number of pages with cover page:	4	
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Comments:**PLEASE PROCESS THE ATTACHED.**

Attorney Docket No.: 495152000110
Group Art Unit: 1742
Examiner: W. Leader
Application No.: 09/837,902
Filing Date: April 18, 2001
Inventor: Hui WANG
Title: PLATING APPARATUS AND METHOD
Attached is the following:

1. RCE Transmittal (1 page); and
2. Fee Transmittal, in duplicate (2 pages total).

sf-1987994

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PTO/SB/30 (09-04)

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Request For Continued Examination (RCE) Transmittal Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/837,902
	Filing Date	April 18, 2001
	First Named Inventor	Hui WANG
	Art Unit	1742
	Examiner Name	W. Leader
	Attorney Docket Number	495152000110

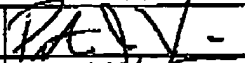
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. ☒ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- ii. ☐ Other _____
- b. ☐ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other _____
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other _____
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 03-1952. I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other _____
- b. ☐ Check in the amount of \$ _____ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Signature		Date	August 22, 2005
Name (Print/Type)	Peter J. Yin	Registration No.	44,417

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office, fax number 571-273-8300, on the date shown below.

Dated: August 22, 2005

Signature:  Christina Carter

sf-1986846

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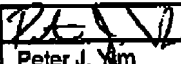
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PTO/SB/17 (12-04V2)

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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4310). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number: 09/837,902 Filing Date: April 18, 2001 First Named Inventor: Hui WANG Examiner Name: W. Leader Art Unit: 1742 Attorney Docket No.: 495152000110																																					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27																																							
TOTAL AMOUNT OF PAYMENT (\$) 395.00																																							
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments																																							
FEE CALCULATION																																							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																							
	FILING FEES		SEARCH FEES																																				
	<table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> </tr> </tbody> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	Design	200	100	Plant	200	100	Reissue	300	150	Provisional	200	100	<table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>500</td> <td>250</td> </tr> <tr> <td>Design</td> <td>100</td> <td>50</td> </tr> <tr> <td>Plant</td> <td>300</td> <td>150</td> </tr> <tr> <td>Reissue</td> <td>500</td> <td>250</td> </tr> <tr> <td>Provisional</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	500	250	Design	100	50	Plant	300	150	Reissue	500	250	Provisional	0	0
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2. EXCESS CLAIM FEES																																							
Fee Description			Small Entity Fee (\$)																																				
Each claim over 20 (including Reissues)			50																																				
Each independent claim over 3 (including Reissues)			200																																				
Multiple dependent claims			360																																				
<table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>-</td> <td>=</td> <td>x</td> <td>=</td> </tr> </tbody> </table>			Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	-	=	x	=	<table border="1"> <thead> <tr> <th colspan="2">Multiple Dependent Claims</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>-</td> <td>=</td> </tr> </tbody> </table>	Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)	-	=																						
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3. APPLICATION SIZE FEE																																							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																							
<table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>-</td> <td>=</td> <td>/50</td> <td>(round up to a whole number) x</td> <td>=</td> </tr> </tbody> </table>			Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	-	=	/50	(round up to a whole number) x	=																											
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4. OTHER FEE(S)																																							
Non-English Specification. \$130 fee (no small entity discount)																																							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...			395.00																																				
SUBMITTED BY																																							
Signature: 		Registration No. (Attorney/Agent): 44,417	Telephone: (415) 268-6373																																				
Name (Print/Type): Peter J. Kim		Date: August 22, 2005																																					

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